

clementia



## Palovarotene Clinical Program Update

Saturday, May 21, 2016

2016 FOP Friends, UK Conference & Family Gathering

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# Palovarotene Development Program

**Objective: Provide sufficient data for regulatory review/approval of palovarotene for the treatment of FOP in adults and children**

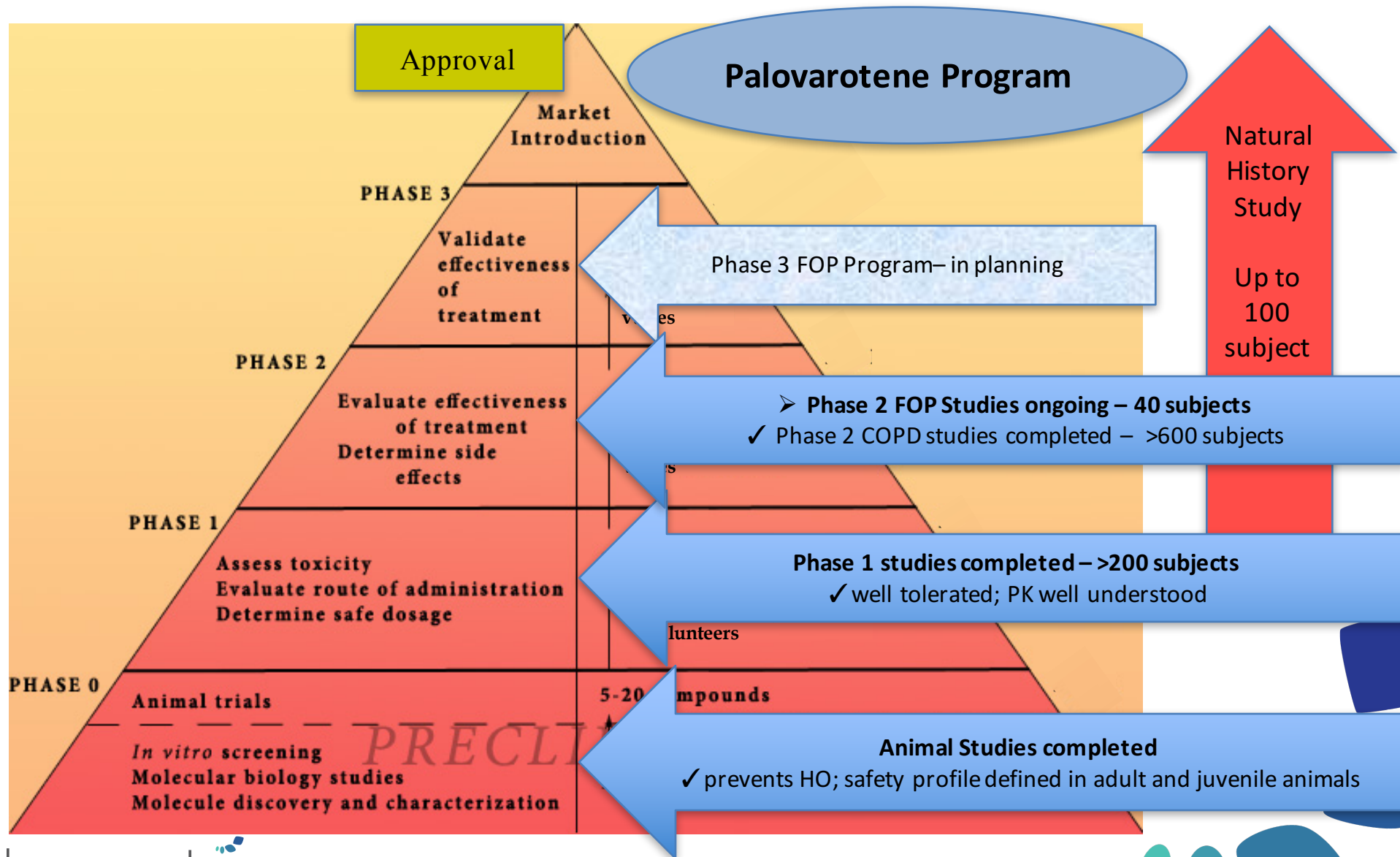
*Key activities necessary to accomplish objective:*

- Understand how the molecule may impact FOP
- Determine the effects in animal models of FOP
- Determine the toxicity in animals
- Understand the course of FOP and flare-ups
- Determine the pharmacokinetics and safety in healthy volunteers
- Explore ability of various doses to prevent HO
- Confirm the efficacy in preventing HO
- Evaluate safety and tolerability at the doses that are necessary to prevent HO

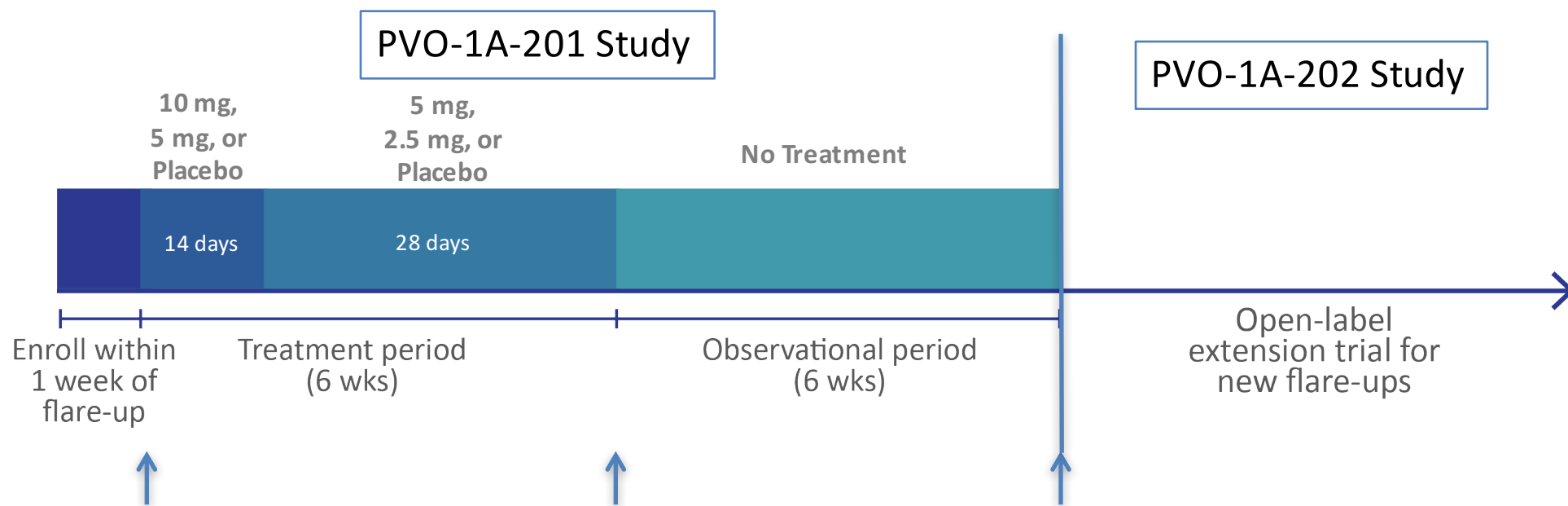


# Drug Development Pathway

## Where Are We With Palovarotene?



# Phase 2 Program in FOP: An Overview



## Primary endpoint:

% responders, (no or minimal new bone formation by X-ray at 6 weeks)

### Imaging endpoints

- X-ray
- CT scan
- MRI or ultrasound (US)

### Functional endpoints

- FOP Patient Reported Outcome (PRO)
- Range of motion
- Global Health scales

### Symptom and other measures

- NRS pain and swelling
- Cartilage, bone and inflammatory biomarkers
- Device questionnaire

- Randomized, double-blind, multicenter, placebo-controlled (3:1 randomization)
- Adaptive (for dose, duration and timing of assessments)
- All subjects successfully completing 12 week DB trial can participate in OLE

May 21,, 2016  
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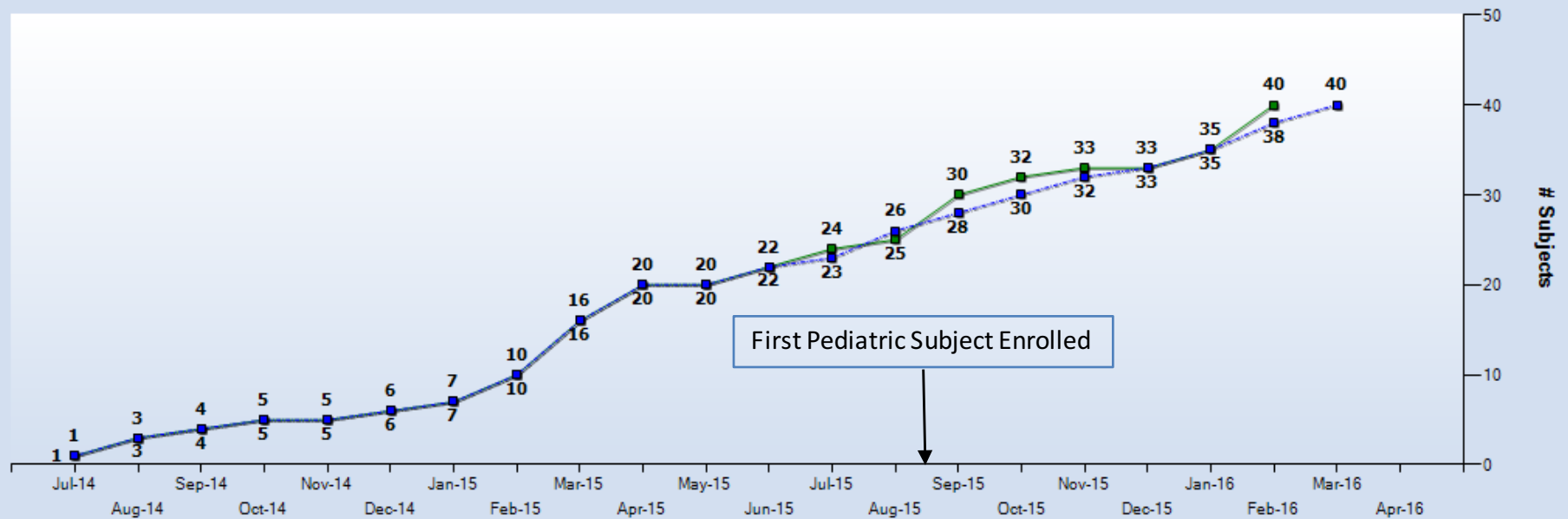
# Phase 2 Study – PVO-1A-201

## Recruitment

- Enrollment Complete- 40 subjects enrolled (28 adults; 12 children)!
- Enrollment average over entire study was 2 subjects/month

Clementia Pharmaceuticals PVO-1A-201 (CLM1201)  
29-Feb-2016  
Enrollment Graph

—■— Actual randomized —■— Projected randomized

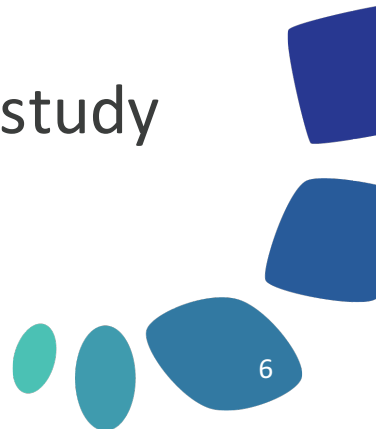


# Phase 2 Study - PVO-1A-201

## *Baseline Characteristics/Flare-up locations*

- 40 subjects enrolled
  - Average age: 22 years (range 7-53)
  - 46% male
- Flare-up Locations:

– Shoulder – 4	Hip/thigh - 17
– Elbow – 4	Knee - 9
– Wrist – 2	Ankle – 2
– Abdomen – 1	Chest – 1
- 1 subject ongoing; all subjects completing 12-week study have enrolled into open label extension



# Phase 2 Interventional Trials

## *Lessons Learned to Date*

- Well designed and executed patient assessment, travel and at-home care has allowed for timely enrollment of subjects across the globe
  - The 40 subjects have come from 12 different countries (US, Canada, Argentina, Brazil, Venezuela, France, England, Northern Ireland, Netherlands, Spain, Australia, India)
  - Travel has included car, airplane, and air ambulance
  - Accompanied by up to 2 caregivers (and occasionally siblings)
- Able to enroll subjects (except 1) within the 7 day flare-up start window
- All subjects able to undergo flare-up site specific x-ray and CT scan (except 1)
- Large proportion of subjects unable to undergo MRI imaging – added ultrasound (US) to protocol for edema assessment

# Phase 2 Interventional Trials

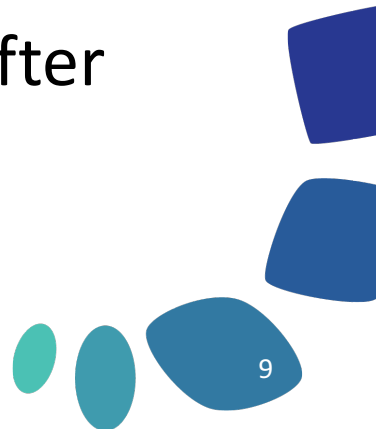
## *Lessons Learned to Date*

- Substantial flare-up symptoms reported by subjects across both studies
  - Most common: pain (95%), swelling (69-77%), stiffness (55-74%), decreased range of motion (41-62%), and warmth (46-51%)
  - 46-67% reported at least 4 symptoms
- Current palovarotene dosing regimens are well tolerated with no safety issues identified
  - No subject discontinued treatment or required reduction of dose
- Low dose CT scan more sensitive than x-ray in identifying new HO
- Vast majority of flare-ups that formed new HO developed it by 6 weeks

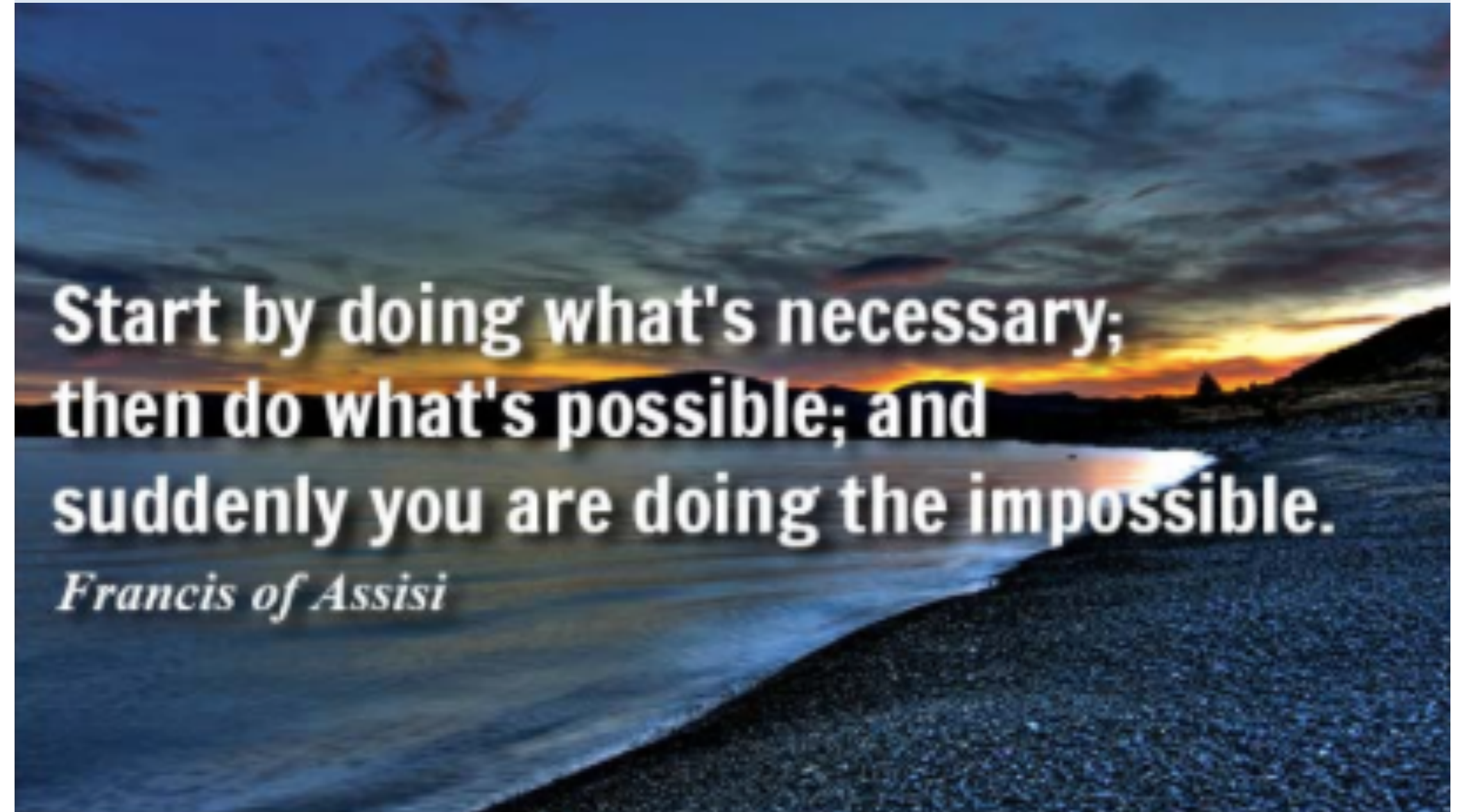


# Next Steps

- Complete subject participation in Phase 2 study (-201)
- Complete collection of all the data, ensuring accuracy
- Analyze results
- Report high level results to FOP community – Fall 2016
- Once dose response established, utilize data (including NHS data) to finalize design and initiate Phase 3 program:
  - Study to confirm prevention of HO
  - Study to evaluate preservation of movement after surgical removal of HO



*Sincere gratitude to the patients/families,  
clinicians/researchers who have given their time  
and effort to this quest!*



**Start by doing what's necessary;  
then do what's possible; and  
suddenly you are doing the impossible.**

*Francis of Assisi*